

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		1				
3		1				
4		1				
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49						
50						
TOTAL IND.	4					
TOTAL DEP.	16					
TOTAL CLAIMS	20					

TOTAL IND.	4	↓			
TOTAL DEP.	16	←	↓	←	↓
TOTAL CLAIMS	20	██████	██████	██████	██████

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS